

# Retail Food Inspection Report


Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> STARLIGHT COFFEE COMPANY	<b>Telephone Number</b> Est 502-645-1411 Own (502) 645-1411	<b>Date of Inspection</b> 08/26/2020	<b>ID#</b>
<b>Address</b> 3131 GRANTLINE RD, NEW ALBANY IN 47150			
<b>Owner</b> JIM BOOK	<b>Purpose</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	<b>Follow Up</b>	<b>Released</b> 08/26/2020
<b>Owner's Address</b> 101 LAFOLLETTE STATION FLOYDS KNOBS, IN 47119-		<b>Menu Type</b> 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
<b>Person in Charge</b> WES APPLGATE			
<b>Responsible Person's Email</b>			
<b>Certified Food Handler</b> JULIA PALMER			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
118	X			Observed employee unable to answer questions regarding best sanitization practices. Employee (and any others without proper training) should retrain with CFM.	1 WEEK
291		X		Observed no sanitizer test strips available.	1 WEEK

Summary of Violations C 1 NC 1 R 0

Received by (name and title printed): WES APPLGATE	Inspected by (name and title printed): A.J. Ingram CHEIF FOOD SPECIALIST
Received by (signature):	Inspected by (signature): 
cc:	cc: